

SUPPLEMENT TO THE INITIAL STATEMENT OF REASONS

Section 81071(b)(3)

Specific Purpose:

This section is adopted to require the licensing agency to return the register undamaged and in good order within three business days following the date the records were removed.

Factual Basis:

This section is necessary for accountability and because these important records are needed by the licensee to fulfill their regulatory duties around medical issues and to communicate with the authorized representative. The Department decided three business days to accomplish this task is a reasonable amount of time.

**Final Modification:**

**Based on OAL feedback, this section is amended to clarify that if the register of clients is removed from the licensing facility, it shall be returned in the condition that it was received. It is necessary to return the register undamaged and in the condition that it was received to allow the licensee to retrieve pertinent documents without disruption or delay. The words "good order" were deleted and the phrase "the condition that it was received" was added in order to make the requirement more specific and measureable.**

**It is necessary to return the register undamaged and in the condition that it was received to allow the licensee to retrieve pertinent documents without disruption or delay. The Department and the California Association of Social Rehabilitation Agencies (CASRA), the provider agency for Social Rehabilitation Facilities (SRFs), agreed that three business days to accomplish this task is a reasonable amount of time. Given that the licensing agents at times are required to drive hours to a facility, this will allow the Department sufficient time to get copies at the Regional Office and return the original to the licensee.**

Sections 81071(c) through (c)(2)

Specific Purpose:

These sections are derived from current Sections 81071(a)(2) and (a)(2)(A).

Section 81071(c)(1) requires the licensee to keep a hardcopy of the register in an easily accessible and transportable container, which may include, but not be limited to, a binder or folder, so that information in the register may be accessed by facility staff and/or the

licensing agency as necessary and easily transported in the event of a disaster or an emergency.

Section 81071(c)(1) was added at the request of CASRA, the provider agency for social rehabilitation facilities. This new language provides clarity to facilities regarding how a register of clients can be maintained.

Section 81071(c)(2) is merely renumbered from current Section 81071(a)(2)(A)

Factual Basis:

These sections are necessary because it is important to enable the licensing agency to conduct its oversight function. It is also necessary because when a client is in need of emergency medical service, having a register in an easily accessible and transportable container may save essential seconds, so that the licensee doesn't have to search for important information, they can just grab the register and take it to the hospital.

**Final Modification:**

**Based on OAL feedback, Section 81071(c)(1) is amended to remove the phrase "as necessary" from the regulation because having that phrase makes the regulation unclear as to what timeframe is being referenced and could cause confusion to the reader.**

Section 81075(o)(3)

Specific Purpose:

This section is necessary to require that if the client has a written individual medication management plan, the licensee ensures that staff who are teaching and assisting the client have received adequate training from a licensed professional who is authorized by law to administer medications, including but not limited to a registered nurse, vocational nurse or psychiatric technician.

Factual Basis:

This section is necessary to ensure the staff are properly trained by experts in the field who have not only the education, but also licensure from their appropriate medical board. This section is consistent with existing Sections 81065(q) and (r), which require facility staff to have job-related training, including training on medications. The requirement that a licensed professional perform health-related training for facility staff is consistent with existing Section 81092.1(f)(2).

**Final Modification:**

**Based on OAL feedback, Section 81075(o)(3) is amended to clarify that "to meet the needs of the client" means "consistent with the Needs and Services Plan." This section**

**is consistent with the expectation that the clients will be managing their own medications and the proper training of the staff is required so that the staff may use this training to effectively assist the clients in their learning to independently manage their own medications, which will be consistent with the client's Needs and Services Plan.**

Sections 81075(o)(3)(B) through (o)(3)(E)

Specific Purpose:

These sections require the licensee to: 1. Obtain from the licensed professional documentation outlining the information contained in the training and the names of facility staff who completed the training; 2. Ensure that the licensed professional reviews staff performance as the licensed professional and/or the licensee deem necessary; 3. Ensure the training is completed prior to facility staff providing services to the client as part of the client's individual medication-management plan; and 4. Ensure all training is documented in facility personnel files.

Factual Basis:

Section 81075(o)(3)(B) is necessary to ensure that the licensee obtains appropriate documentation regarding the training from the licensed professional, including the names of facility staff who completed the training. This serves as written verification that the training met licensing requirements. This requirement is consistent with existing Sections 81092.1(k)(1) and 81090(b)(4)(B).

Section 81075(o)(3)(C) is necessary to ensure that the licensed professional reviews staff performance on an ongoing basis as the licensed professional and/or licensee deem necessary. This is consistent with existing Sections 81092.1(k)(2) and 81090(b)(4)(C). The provision "as the licensee deems necessary" is added to ensure that facility staff have access to the licensed professional in case questions arise. No outside time frame is given because the time needed to educate clients about how to store and manage their own medications can vary from client to client; and depending on the individual needs of the client, may progress fairly quickly.

Section 81075(o)(3)(D) is necessary to ensure that facility staff complete the training prior to providing services to clients. This is a standard safeguard to protect the health and safety of clients in care.

Section 81075(o)(3)(E) is necessary to ensure that documentation is on file to verify that facility staff have received the training. This is a standard requirement across all licensing facility categories.

**Final Modification:**

**Based on OAL feedback, Section 81075(o)(3)(C) is amended to clarify that the licensee or designee shall review and document staff performance annually for the purpose of**

**quality assurance regarding educating and assisting the client with their individual medication-management plan. This provision also allows a licensee to delegate this staff performance review and documentation responsibility to a designee who would be an administrator or other staff. This clarifies for the field staff that when they are ensuring compliance with the documentation of the staff performance review, it is permissible that a name other than the licensee's name could be on the documentation. This is a standard practice that the Department allows for in regulation to support the operation a facility and the Department does not want to overregulate this behavior. In the Department's experience, an annual review of staff performance has been shown to be an effective benchmark for reviewing and updating staff training requirements in order to ensure quality care and supervision. This is exemplified in Section 81092.1(k)(2) for when a licensed health professional delegates routine care and the annual requirement is also exemplified in Section 81068.3 for the Needs and Services Plan of each client. Documenting this review will also ensure that the Department will be able to review how the Licensee and staff support the medication-management plans for clients.**

Sections 81075(o)(5) through (o)(9)

Specific Purpose/Factual Basis:

These sections are adopted to establish further requirements that apply to individual medication-management plans in social rehabilitation programs.

Section 81075(o)(5) requires the licensee to ensure that the client's individual medication-management plan is designed to provide staff support and encourage client independence, assist the client in holding, managing, and safeguarding all of his/her own medications. Handbook is provided to include pertinent sections of CCR Title 9, Sections 532.1(c) and (g) for ease of use.

Section 81075(o)(6) requires the individual medication-management plan to be included in the client's written treatment/rehabilitation plan, which is part of the client's Needs and Services Plan.

Section 81075(o)(7) establishes time intervals for assessment and documentation of the client's progress in meeting the goals outlined in his or her individual medication-management plan.

Section 81075(o)(8) ensures that a client's individual medication-management plan includes provisions for terminating the plan if the client fails to follow the plan or otherwise demonstrates that he or she is not capable of safely storing and managing his or her own medications.

Section 81075(o)(9) establishes the conditions under which a client may use a pill box or medication organizer to organize his or her own medications.

#### Factual Basis:

Section 81075(o)(5) is necessary because it will ensure the client can safely handle their medication once they leave the facility and are responsible for their medication. This is also consistent with CCR Title 9, Sections 532.1(c) and (g). It is also necessary to stress the importance of why SRFs were introduced by the Legislature (to provide staff support for the client and help encourage client independence) and to keep the focus on, and assist the client in holding, managing and safeguarding all of his/her own medications.

Section 81075(o)(6) is necessary for clarity and consistency, because the client's Needs and Services Plan is what is used to train facility staff in the treatment needs of the client. This is consistent with the previously mentioned CCR, Title 9, Section 532.1(g) and with Section 81068.2(c)(3).

Section 81075(o)(7) is necessary to ensure that the client's progress is adequately monitored and that any problems or issues are identified and corrected on a timely basis. In addition, nothing precludes the licensee from establishing more stringent time frames for individual clients, as determined to be necessary on a case-by-case basis.

Section 81075(o)(8) is necessary to ensure client safety and needed oversight. It also promotes the licensee setting new parameters for an amended plan so that the client can learn to manage their medication (e.g. at a different pace with greater supervision).

Section 81075(o)(9) is necessary because a client on an individual medication-management training plan is still learning to handle his or her own medications, as a safeguard it is necessary to specify that a pill box or medication organizer cannot be used for more than one week at a time. However, nothing precludes the licensee from imposing an even shorter time frame on a client's use of a pill box or medication organizer, as determined to be necessary on a case-by-case basis. The introductory phrase—"Notwithstanding Sections 81075(k)(5) and (k)(6)"—is necessary because those sections, respectively, require that each client's medication must be stored in its originally received container; and that no medications can be transferred between containers. While Sections 81075(k)(5) and (k)(6) only apply to centrally stored medications, all of a client's medications not stored in a pill box or medication organizer would continue to be centrally stored.

#### Final Modification:

**Based on OAL feedback, Section 81075(o)(8) is amended to remove the phrase "fails to make sufficient progress in meeting the plan's goals, or otherwise" from the regulation as it may cause confusion to the reader and is unnecessary language with regard to the intent of this subsection. It is necessary to terminate the plan when the client cannot safely store and manage his or her medications because it is necessary that the client be reevaluated by the licensed professional to identify the reason the client was no longer able to follow the plan and to determine if a new plan should be developed for that client or not. This change makes it clear that the only reason for terminating the client's participation in the plan is due to their inability to manage their own medications. This section is necessary to ensure that the client's safety is protected**

**when the client cannot safely store and manage his/her medications. For example, if a client takes a higher dosage of their medication as prescribed and it endangers the client's well-being, the licensee would have clear demonstration that the plan can be terminated for the client's safety.**

c) Local Mandate Statement

These regulations do impose a mandate upon local agencies. The mandate is not required to be reimbursed pursuant to part 7 (commencing with Section 17500) of Division 4 of the Government Code or Section 6 of Article XIII B of the California Constitution because implementation of the regulations only impact licensees that make the business decision to admit the clients which would require these regulatory provisions. In addition, some of these regulations actually ease the requirements upon the licensee.

**Following the public hearing and based on OAL and the Department of Finance feedback, it was discovered that the wrong Local Mandate Statement was used as the implementation of these regulations do not impose a mandate on local agencies and therefore it should read as follows:**

**These regulations do not impose a mandate on local agencies. There are no state-mandated local costs in this order that require reimbursement under the laws of California. Implementation of the regulations only impact licensees that make the business decision to admit the clients which would require these regulatory provisions. In addition, some of these regulations actually ease the requirements upon the licensee.**